

09/852919

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	FK	10/8	6/1
RESPONSE FORMALITY REVIEW	AM	917	10-11-01

INDEX OF CLAIMS

✓ Rejected
 u Allowed
 - (Through numeral)... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
1	10-20-01
2	10-20-01
3	10-20-01
4	10-20-01
5	10-20-01
6	10-20-01
7	10-20-01
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44	10-20-01
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49	10-20-01
50	10-20-01

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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RE 2/4
 10-17-01
 10-17-01

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